



Candidate Petition

Independent Candidate

TO ELECTION COMMISSION of _____ County:

We, the undersigned qualified electors of _____,
(County/District name and number, as applicable)
State of Mississippi, hereby petition that the name of _____ be
placed upon the ballot of the _____ election to be held on _____, 20_____,
(General/Special)
as a candidate for the office of _____.
(Office sought and District, if applicable)

1.	SIGNATURE _____ Address _____	Printed Name _____ Precinct _____
2.	SIGNATURE _____ Address _____	Printed Name _____ Precinct _____
3.	SIGNATURE _____ Address _____	Printed Name _____ Precinct _____
4.	SIGNATURE _____ Address _____	Printed Name _____ Precinct _____
5.	SIGNATURE _____ Address _____	Printed Name _____ Precinct _____
6.	SIGNATURE _____ Address _____	Printed Name _____ Precinct _____
7.	SIGNATURE _____ Address _____	Printed Name _____ Precinct _____
8.	SIGNATURE _____ Address _____	Printed Name _____ Precinct _____
9.	SIGNATURE _____ Address _____	Printed Name _____ Precinct _____
10.	SIGNATURE _____ Address _____	Printed Name _____ Precinct _____

Copy this form for succeeding pages.
The appropriate county registrar must certify signatures on this form.
The opening paragraph of each page of signatures **MUST** include:
(1) The name of the candidate,
(2) office sought, AND
(3) date of the election.

*This petition shall be used **only** for candidates whose district falls wholly within one county.*